

# The Role of Early Care and Education in Addressing Opioid Misuse: A Focus on Head Start



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# PURPOSE OF HEAD START & EARLY HEAD START



To promote the school readiness of low income children by enhancing their cognitive, social and emotional development –

- in a learning environment that supports children's growth in language, literacy, mathematics, science, social and emotional functioning, creative arts, physical skills, and approaches to learning and
- through the provision of health, educational, nutritional, social and other services that are determined, based on family needs assessments, to be necessary.

SOURCE: [HEAD START ACT](#) Sec. 636. [42 U.S.C. 9831] as revised in 2007



# Head Start and Early Head Start Snapshot: 2016-2017

- **1,071,000 children** from **birth to age 5** including **pregnant women** received Head Start services.
- In addition to education services, Head Start programs provide children and their families with **health, nutrition, social-emotional, and family services**.
- **1,600** grantees nationwide including the territories.
- Head Start offers center-based, family child care, and home visiting programs.



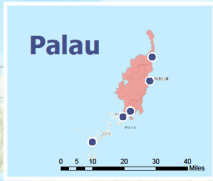
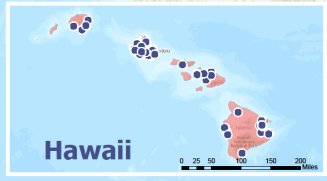
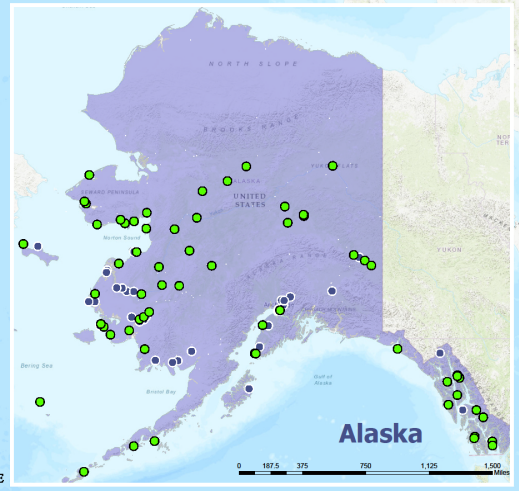
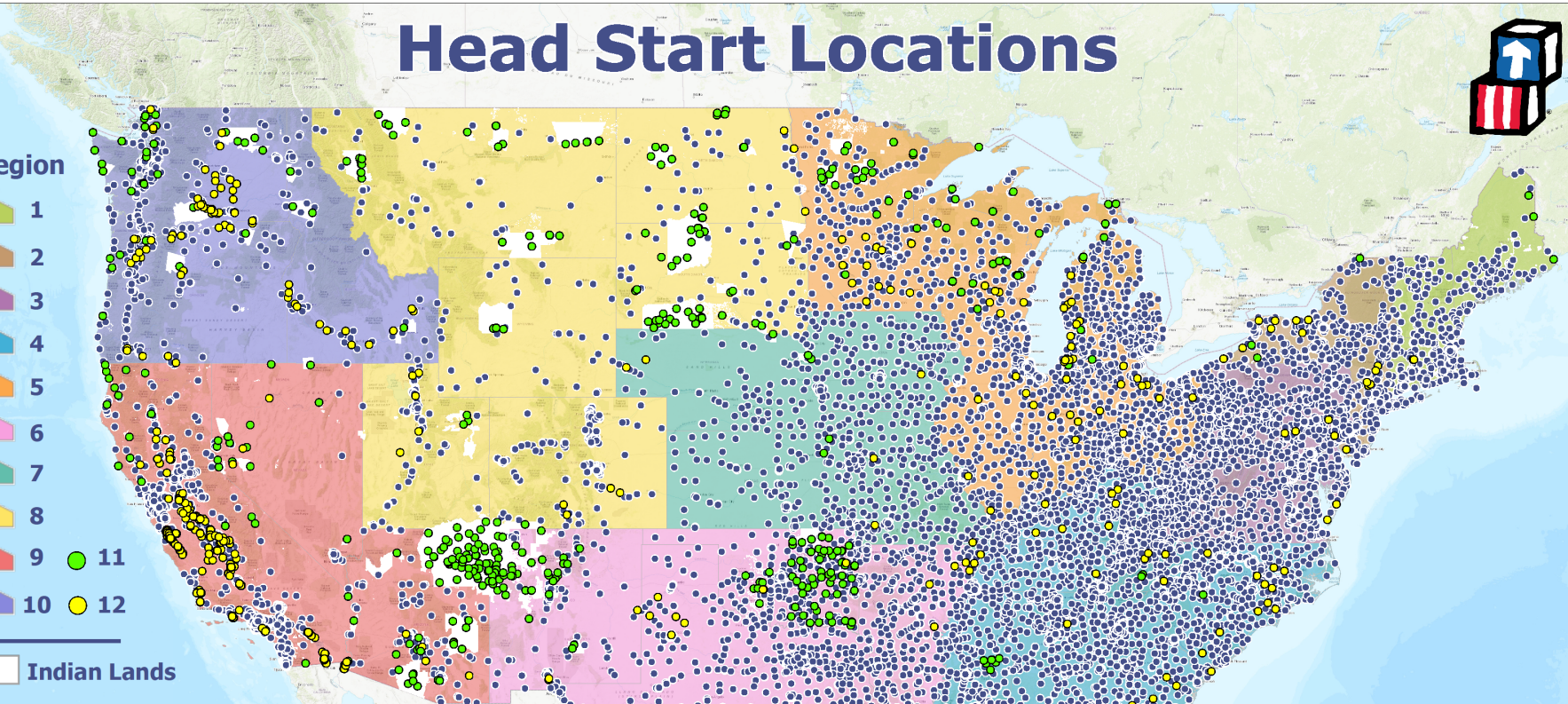
# Head Start Locations



## Region

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12

Indian Lands



# Head Start Staff: On the front line

- Enrolled women misusing opioids and other substances while pregnant
- Infants and children entering care with neonatal abstinence syndrome, drug related developmental delays or trauma-related behavioral challenges

- A shortage of bus drivers because applicants cannot pass drug tests
- Lack of knowledge about what to do if a parent who appears to be using substances comes to pick up their child

- Needing training for home visitors
- An increase in children's challenging behaviors
- An increase in other substance misuse

"The opioid epidemic has effected every aspect of our agency, and every program. We see children being raised by grandparents or foster care. We see many wanting treatment, and some receive it, but there is no local aftercare."

# OHS Efforts to Address Opioid Misuse

- Head Start Program Performance Standards – Social-Emotional Focus
- Training and Technical Assistance (T/TA): National Center for Early Childhood Health and Wellness
  - Research-informed and reflects current evidence
- Expert workgroup – How can early Head Start, Head Start and other early care and education services help young children and their families impacted by opioid and other substance use disorders?
- 11 Regional Meetings – Understanding how the opioid crisis and substance use disorders impact Head Start children, families and staff: Creating a path forward



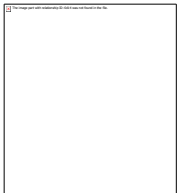
# OHS Efforts to Address Substance Misuse

- Head Start programs have provided:
  - 84,500+ families with mental health services
  - 68,002+ families with services in response to concerns of child abuse and neglect
  - 32,000+ families with substance abuse prevention services
  - nearly 10,000 families with substance abuse treatment referrals
  - services to more than 31,000 children living in foster care



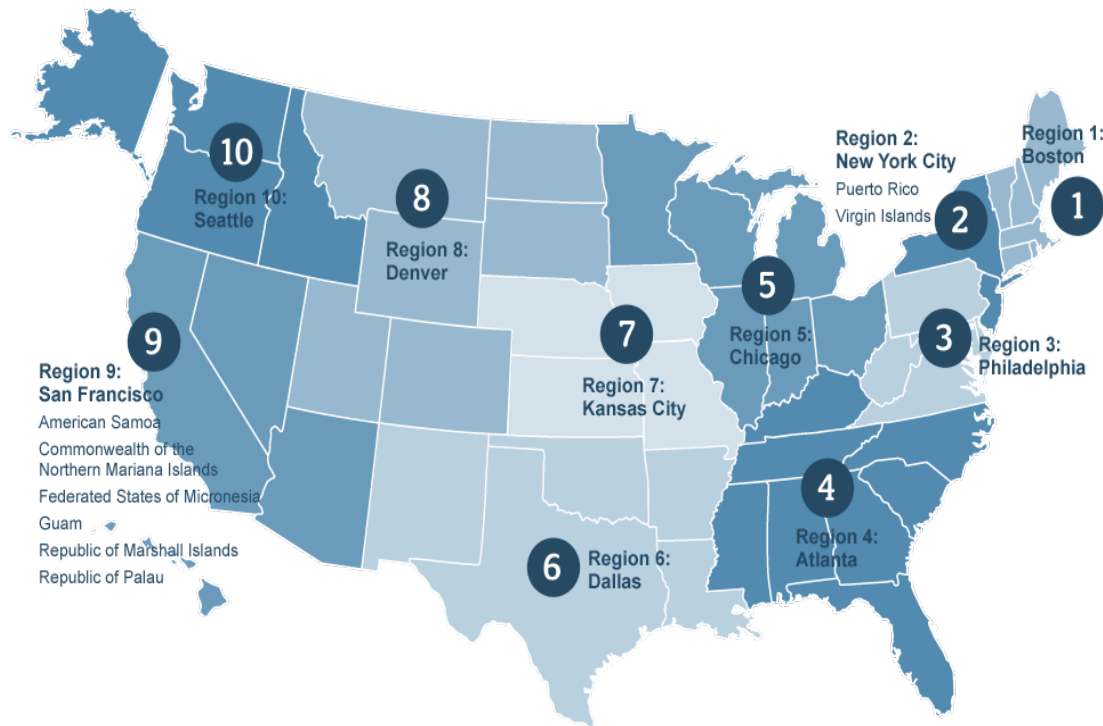
# Head Start Program Manager Survey

- Does your agency have any strategies related to opioid misuse?
- Are these strategies targeting any of the following? Staff, Parents/caregivers, Children
- Do these strategies include collaboration with community partners?
- How long have you been engaged in these strategies ?
- Please fully describe your efforts including what this strategy looks like on the ground
- How has the opioid epidemic impacted your agency?





# Survey Respondents

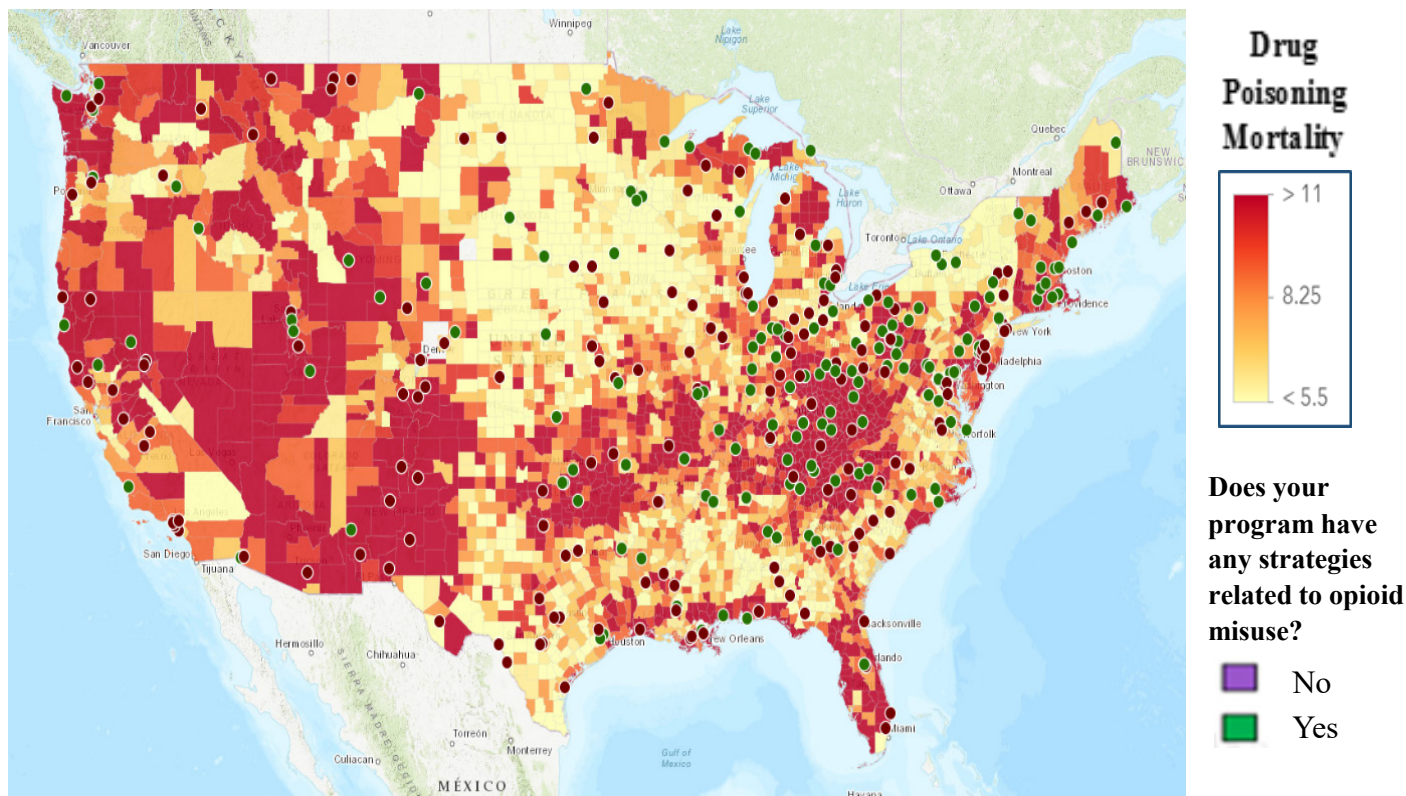


\*\* There are approximately 3,000 Head Start programs in the U.S. Of these, 379 (12.6%) are represented in these results.

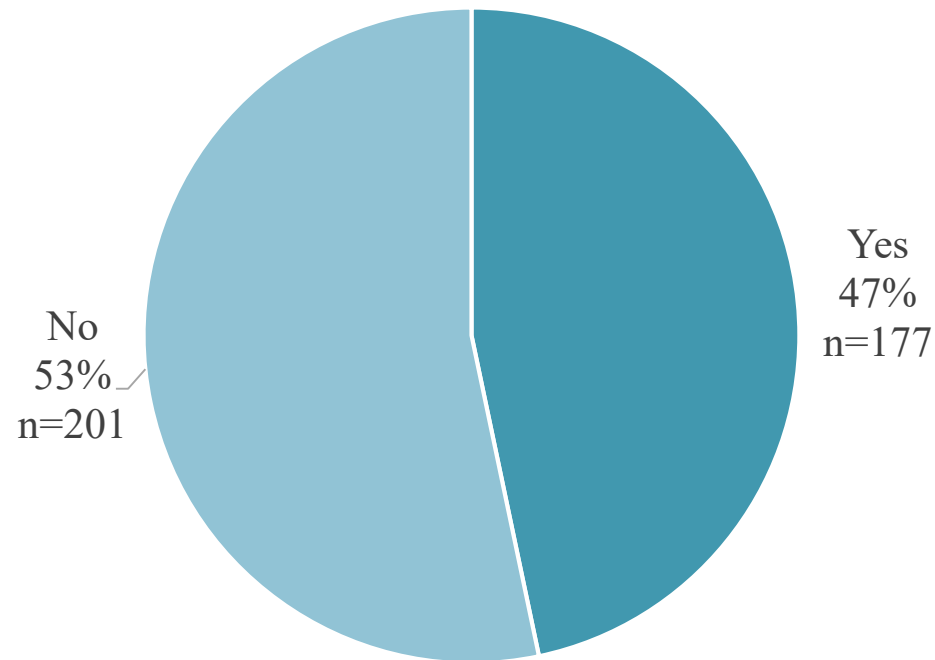
348 unique grants  
 307 cities  
 52 U.S. States,  
 Territories (Palau  
 and Puerto Rico),  
 and Tribes



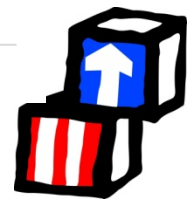
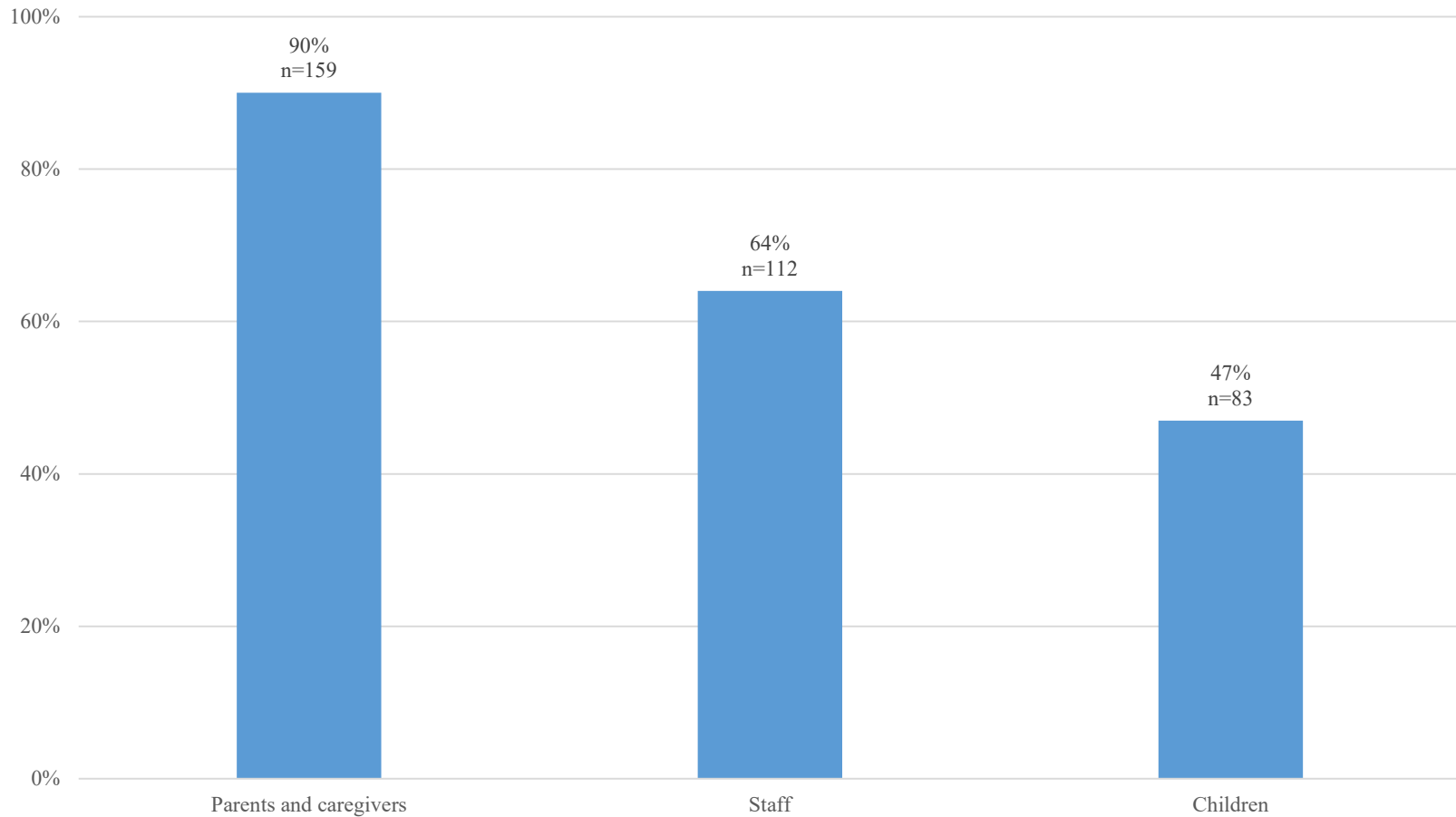
# Location of survey respondents overlaid with rates of drug poisoning mortality, 2016



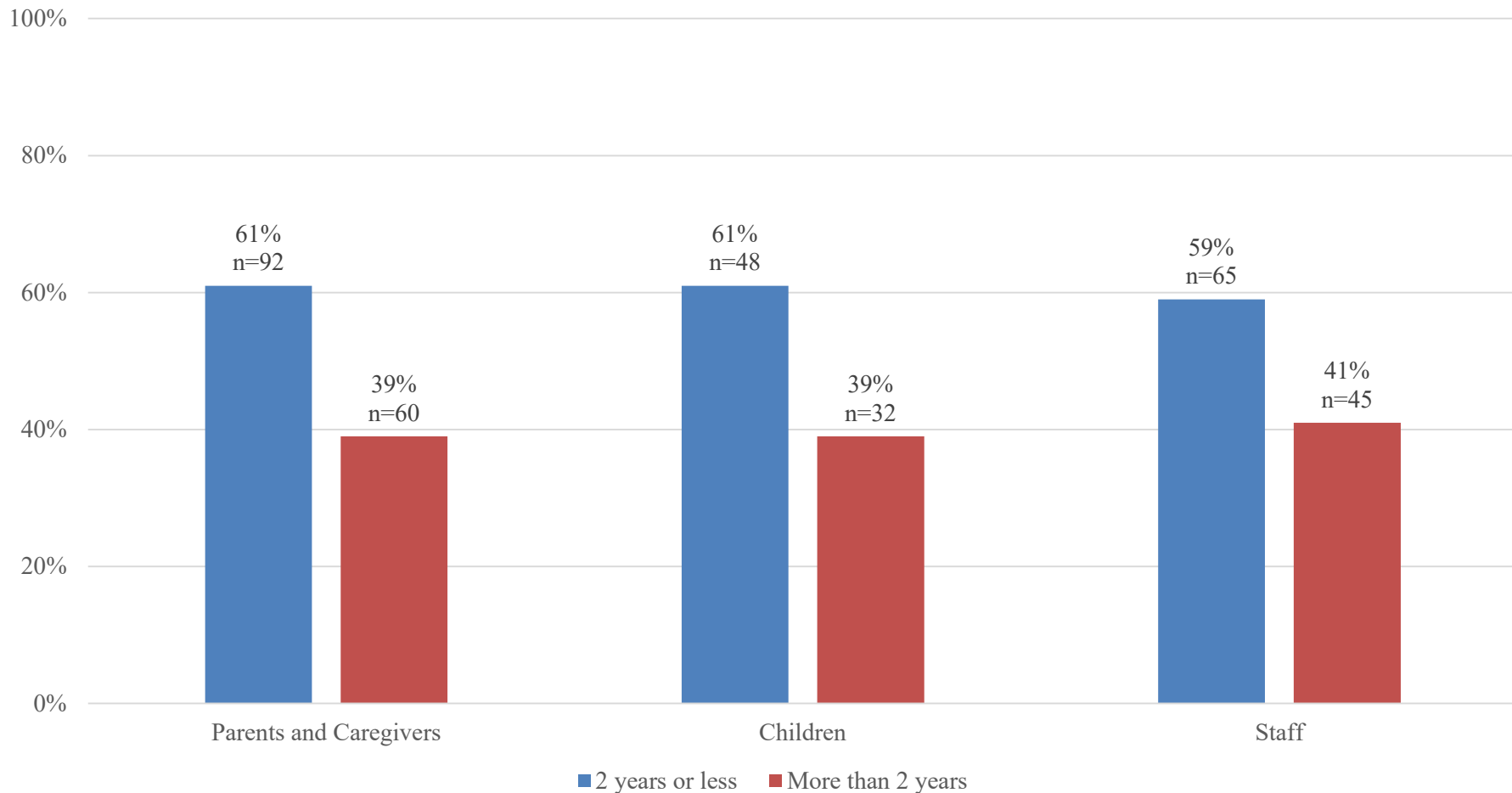
# Percentages of programs with strategies related to opioid misuse



# Targets of Head Start Program Respondents' Strategies Related to Opioid Misuse



# Time Engaged in Strategies



# Voices from the Field: Strategies

[We are] part of the state's opioid response [that] uses Peer Recovery Coaches to deliver services to pregnant and parenting women and their families ... wherever parents feel most comfortable, including their home, the office, [or] the community.  
– Pelham, New Hampshire

[We have] implemented a needle exchange program with the focus on decreasing the number of HEP C patients, and clean needle use... Five people in the last 6 months have entered a drug treatment program... Parents who have been in active recovery are eligible to join and receive [our tribe's] culture and history training and visits to historic sites, planting a garden and being in the earth, interviewing skills, [and] assistance with GED [or] higher education. – Florence, Alabama

... Part of our strategy is targeting home visiting services, including EHS, to mothers leaving the NICU with an NAS baby. In addition to this partner work, we as a program are providing additional training to our home visitors on substance misuse, we have provided all of our Head Start staff with Narcan and general substance misuse training to classroom staff, and we are tracking which children come into our Head Start program with a history of NAS to provide better intervention strategies. – Skandia, Michigan

[At our program,] Narcan training is provided to parents and staff. Narcan is kept on site at all of the centers. – Oak Ridge, Tennessee

Our Family Services Manager has attended training to learn more about substance misuse in families, and grandparents raising grandchildren due to substance misuse. We are implementing "Grandparent Cafes" to allow grandparents to interact with each other, and discuss related issues.  
– Leitchfield, Kentucky

[We] also help to educate doctors and health care providers in the area about the dangers of prescribing narcotics. [We] sponsored medication drop-offs in the community and provided medication lock boxes for families and community members. – Waynesville, North Carolina



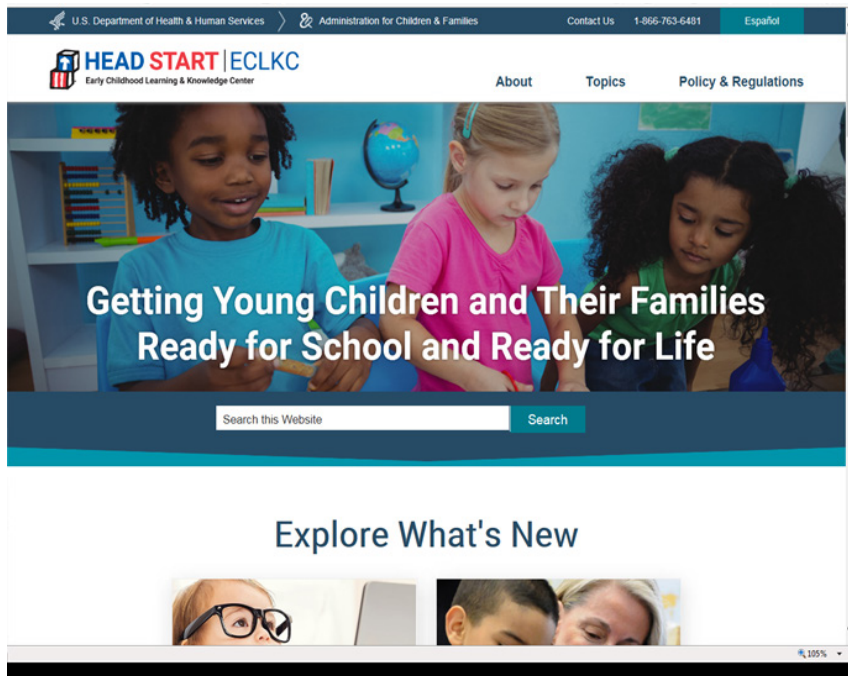
# Strategies most commonly reported

- Awareness and sensitivity training (flyers, pamphlets, staff training)
- Partnering with hospitals, child welfare and local treatment facilities to obtain wraparound care (housing, EHS services, home visiting)
- Interventions within the program to improve the parent-child bond
- Monthly support groups for grandparents
- Training staff to carry and administer Naloxone
- Mental health consultant support and referral

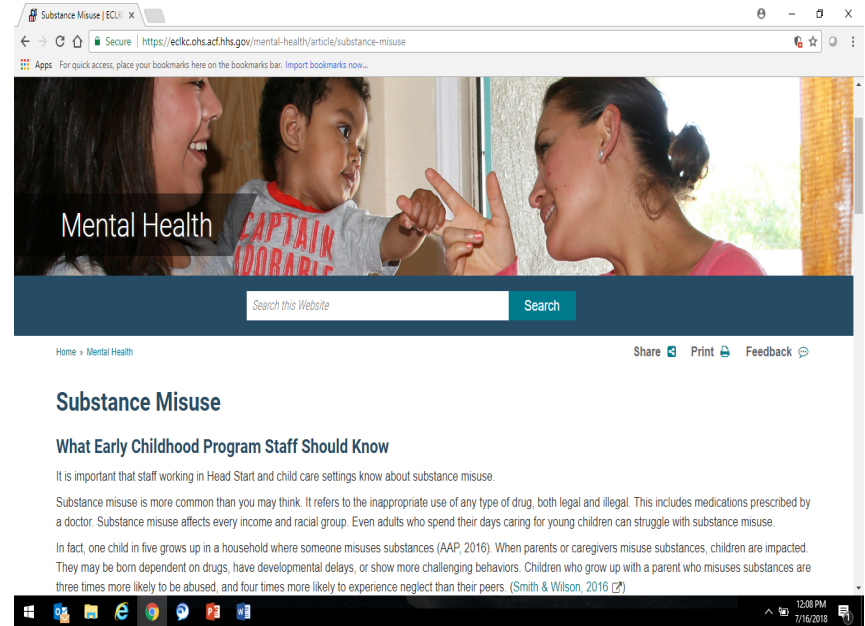


# Head Start Early Childhood Learning and Knowledge Center (ECLKC)

<https://eclkc.ohs.acf.hhs.gov/>

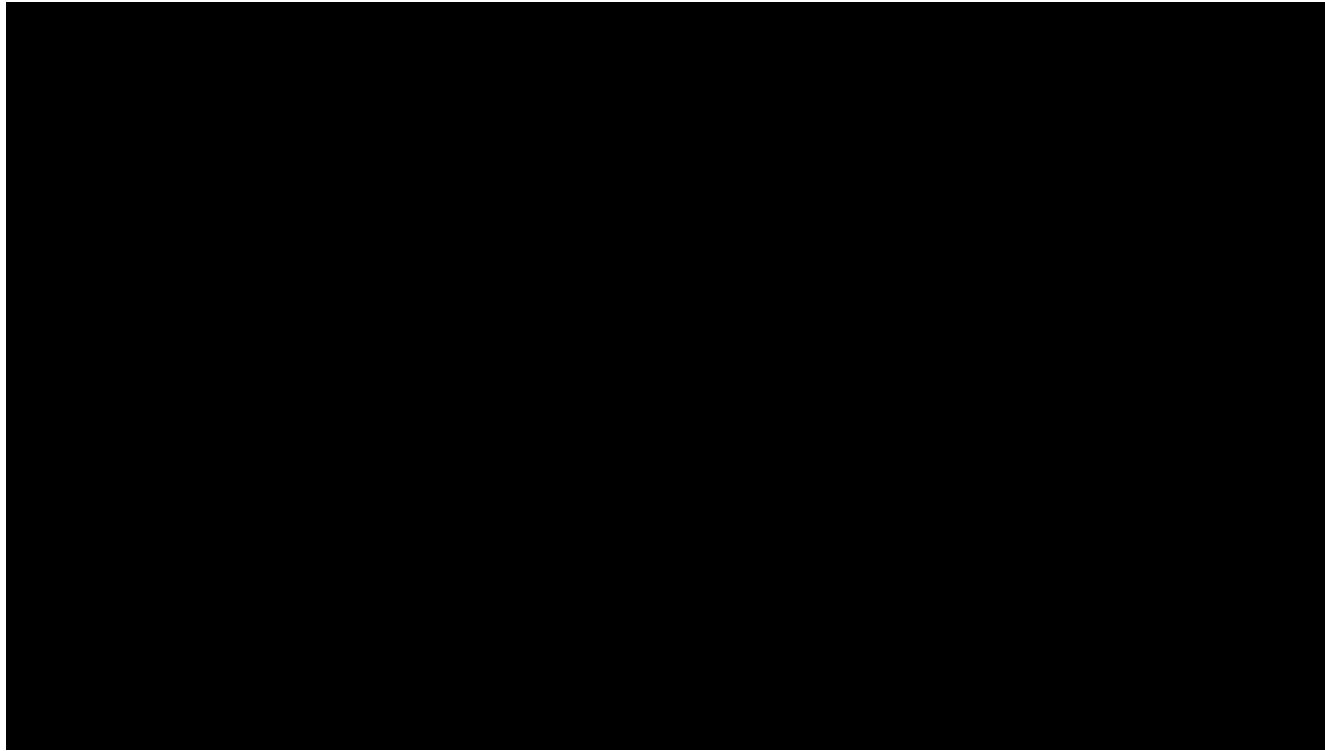


<https://eclkc.ohs.acf.hhs.gov/mental-health/article/substance-misuse>





# Catching Up: Gina's Story of Recovery



<https://vimeo.com/349559238>

